

VII. AMERICAN'S WITH DISABILITIES ACT

- A. Read aloud verbatim the functional position description for the Emergency Medical Technician.
- B. A copy of the Atlantic EMS Council Functional Position Description for the Emergency Medical Technician is to be included in the Student Information Package.
- C. It is critical that all portions of the description be read and explained clearly to every student in the same manner!
- D. After reviewing the Atlantic EMS Council Functional Position Description for the Emergency Medical Technician, advise the class if anyone feels they may not be able to perform all the tasks and expectations just described, they should see you after class.
 - 1. The student is to be provided a copy of the Accommodation policy and advised to contact the manager of the Licensure and Certification Section of the Office of EMS.
 - 2. Be sure to indicate to the student the location of the Office of EMS phone number and address.
- E. Upon completion, read aloud the statement on the agreement page of the student information package and have the student sign appropriately.

ATLANTIC EMS COUNCIL FUNCTIONAL POSITION DESCRIPTION FOR THE EMERGENCY MEDICAL TECHNICIAN

INTRODUCTION

The following is a position description for the Emergency Medical Technician (EMT) within the Atlantic EMS Council states. This document identifies the minimum qualifications, expectations, competencies and tasks expected of the EMT.

QUALIFICATIONS FOR STATE CERTIFICATION

To qualify for state certification, the applicant must at a minimum:

1. meet minimum state entry requirements.
2. meet course requirements such as attendance and grades.
3. successfully complete all certification/licensure examination(s).

COMPETENCIES

The Emergency Medical Technician must demonstrate competency in handling emergencies utilizing basic life support equipment and skills in accordance with the objectives in the U.S. Department of Transportation National Standard Curriculum for EMT to include having the ability to:

- verbally communicate in person, via telephone and telecommunications using the English language.
- hear spoken information from co-workers, patients, physicians and dispatchers and in sounds common to the emergency scene.
- lift, carry and balance a minimum of 125 pounds equally distributed (250 pounds with assistance) a height of 33 inches, a distance of 10 feet;
- read and comprehend written materials under stressful conditions;
- document, physically in writing, document physically patient information in prescribed format;

- demonstrate manual dexterity and fine motor skills, with ability to perform all tasks related to quality patient care in a safe manner;
- bend, stoop, crawl, and walk on uneven surfaces;
- meet minimum vision requirements to operate a motor vehicle within the state.

DESCRIPTION OF TASKS

- Receives a dispatched call, verbally acknowledges the call, reads road maps, identifies the most expeditious route to the scene, and observes traffic ordinances and regulations.
- Upon arrival at the scene, ensures that the vehicle is parked in a safe location. Safely performs size-up to determine scene safety including the presence of hazardous materials, mechanism of injury or illness, and the total number of patients. Performs triage and requests additional help as necessary.
- In the absence of public safety personnel takes safety precautions to protect the injured and those assisting in the care of the patient(s).
- Using body substance isolation techniques, protects the patient(s) and providers from possible contamination.
- Inspects for medical identification emblems, bracelets or cards that provide patient emergency medical care information.
- Determines nature and extent of illness or injury, checks respirations, auscultates breath sounds, takes pulses, auscultates/palpates blood pressure (including proper placement of the cuff), visually observes changes in skin color, establishes priority for emergency care. Based on assessment findings renders emergency care to adults, infants and children.
- Skills performed include but are not limited to: establishing and maintaining an airway, ventilating patients, cardiac resuscitation, use of automated external defibrillators where applicable. In addition, provides prehospital emergency care of single and multiple system trauma such as controlling hemorrhage, bandaging wounds, treatment of shock (hypoperfusion), spinal immobilization and splinting of painful swollen or deformed extremities.
- Manages medical patients to include, but are not limited to: assisting in childbirth, management of respiratory, cardiac, diabetic, allergic, behavioral, and environmental emergencies and suspected poisonings.
- Performs interventions and assist patients with prescribed medications, including

sublingual nitroglycerine, epinephrine auto injectors, and metered dose aerosol inhalers observing safety measures for others and self.

- Responsible for the administration of oxygen, oral glucose and activated charcoal.
- Reassures patients and bystanders by working in a confident, efficient manner.
- Functions in varied environmental conditions such as lighted or darkened work areas, extreme heat, cold and moisture.
- Performs in situations that create stress and tension on a regular basis.
- Where extrication is required, assesses extent of entrapment and provides all possible emergency care and protection to the patient. Uses recognized techniques and equipment for removing patients safely (to include proper strap placement) Communicates verbally for additional help as needed.
- Complies with regulations for the handling of crime scenes and prehospital deaths by notifying the appropriate authorities and arranging for the protection of property and evidence at that scene.
- Lifts and moves patients into the ambulance and assures that the patient and stretcher are secured, continues emergency medical care enroute in accordance with local protocols.
- Determines most appropriate facility for patient transport. Reports to the receiving facility, the nature and extent of injuries, and the number of patients being transported.
- Observes patient enroute and administers care as directed by medical control or local protocol. Able to maneuver to all points in the patient compartment while transporting with a stretchered patient. Assists in lifting and carrying patient and appropriate equipment from ambulance and into receiving facility.
- Reports verbally and in writing, observations and emergency care given to the patient at the scene and in transit to the receiving staff for record keeping and diagnostic purposes. Upon request, provides assistance to the receiving facility staff.
- Disposes of contaminated supplies in accordance with established guidelines, decontaminates vehicle interior, sends used supplies for sterilization.
- Maintains ambulance in operable condition which includes cleanliness, orderliness and restocking of equipment and supplies. Determines vehicle readiness by checking oil, gas, water in battery and radiator, and tire pressure.

- Checks all medical equipment for future readiness. Maintains familiarity with all specialized equipment.
- Attends continuing education and or refresher training programs as required by EMS agency, medical direction, and/or certifying agency.
- Meets qualifications within the functional job analysis of the EMT.

**ATLANTIC EMS COUNCIL
ACCOMMODATION POLICY**

VIRGINIA DEPARTMENT OF HEALTH

**VIRGINIA OFFICE OF
EMERGENCY MEDICAL SERVICES**

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This document is intended to be distributed by course coordinators to students who after a formal review of the administrative aspects of a Virginia Basic Life Support program believe they need to pursue an accommodation.

ATLANTIC EMS COUNCIL ACCOMMODATION POLICY

I. INTRODUCTION

The Americans with Disabilities Act of 1990 has implications for coordinators and students in the areas of prospective student information, testing of knowledge and skills competency. Among the many provisions of the ADA are several that pertain specifically to agencies, institutions and organizations that provide courses or examinations leading to certification.

The intent emphasizes that individuals with disabilities are not to be excluded from jobs that they can perform merely because a disability prevents them from taking a test or negatively influences the results of a test, which is a prerequisite to the job. Passing written and skills examinations during an EMS course and passing certification examinations are prerequisites for functioning as a certified EMS provider.

This law permits testing that requires the use of sensory, manual or speaking skills where the tests are intended to measure essential functions of the profession. For example, an applicant with a reading disability could be required to take a written examination if the ability to read is an essential function of the profession, and the examination is designed, at least in part, to measure the ability to read. An essential function of an EMS provider is the ability to read and understand small English print under highly stressful conditions for the provider and patient. A second example is one dealing with skills examinations that must be performed within established time frames.

Performing a skill within a certain time frame can be required if speed of performance is an integral part of the skill being measured. Both the ability to read and the ability to perform basic skills within time frames are essential functions of an EMS Provider.

II. SCOPE

The information provided herein applies to all prehospital EMS personnel.

III. SPECIFIC DIRECTIONS

Coordinators must review the standard functional position description and the information concerning the ADA, with every prospective student. Prospective students need to understand the competencies and tasks that are required within the profession BEFORE entering a training program.

Students cannot be discriminated against on the basis of a disability in the offering of

programs or services.

There will be NO allowed accommodations during the course of instruction or certification examinations unless written approval is received from the certification/licensure agency, in advance. Students who have received an accommodation during the course need to fully understand that there is a separate process for requesting an accommodation for the state written and practical certification examination. The certification agency will establish eligibility for an accommodation on a case-by-case basis. Documentation confirming and describing the disability must be submitted according to policy, for consideration.

Here are five examples of accommodations that would NOT be allowed during the instructional program:

1. Additional time for skills with specific time frames will NOT be allowed. Obviously, patients would suffer due to life threatening conditions in emergency situations.
2. No accommodation will be made in a training program that is not reasonably available in a prehospital environment. Students may use performance aids which could be readily available and easily accessible to them in the prehospital setting. It is the responsibility of the student to provide any personal aids they deem necessary and the certifying agency deems appropriate.
3. Unlimited time to complete a written examination is NOT allowed. Such a request is not considered reasonable because a candidate should be able to complete a test within a finite amount of time.
4. Written examinations are NOT to be administered with an oral reader. The ability to read and understand small English print (12 point) is an essential function of the profession, and written examinations are designed, at least in part, to measure that ability.
5. A written examination with a reading level which is lower than the reading level required by the profession to function safely and efficiently should not be administered.

IV. DOCUMENTED LEARNING DISABILITY

Test takers who have presented a documented learning disability relating to reading decoding or reading comprehension may be granted a standard extension. A standard extension allowed for completing a written examination is time-and-a-half. Thus if the

examination is normally administered in two hours, an extra hour could be allowed to complete the examination. This accommodation could be allowed because the individual would be able to perform the essential functions of the position description. The critical nature of reading in emergency situations requires reading finite amounts of material in measured amounts of time, as it is required for taking an examination. Also the reading level of an exam is not impacted by the time requirement of the exam.

The certification/licensure agency will review only written requests for accommodations on the state written certification examination on a case-by-case basis. Requests must be submitted on the "Accommodation Request" form. The state certification/licensure agency will provide written notification upon review of the request for accommodation.

V. DISABILITY ACCOMMODATION POLICY

A. Requesting Accommodations

"Accommodation Request" forms are available from the Office of Emergency Medical Services. The candidate who is requesting an accommodation must complete the request form at the start of the instructional program or as soon as the need for an accommodation is recognized.

Documentation of a specific disability which would impact your performance on the written examination must include a signed statement on letterhead stationery from a professional who is familiar with your disability. This statement must confirm and describe the disability for which the accommodation is required. The professional must have expertise in the specific disability for which the accommodation is being requested.

Applicants with disabilities are entitled to, and have the responsibility to meet the same deadlines for application and submission of documentation established for preregistration as non-disabled individuals. The process involved in establishing eligibility will not impose discriminatory timeliness for application on the individual with a disability.

B. Reasonable Accommodations

The certification/licensure agency will offer reasonable accommodations for the written certification exam for those persons with written documented disabilities.

Based upon an analysis of the Functional Position Description and the written examination, it has been determined that persons with learning disabilities manifested in the academic areas of reading decoding, or reading

comprehension may be eligible for additional time as an accommodation.

Documentation of a specific disability which would negatively impact one's performance on the written examination must include a complete "Accommodation Request" form with signature of the individual. This statement must confirm and describe the disability for which an accommodation is being requested.

Requests for accommodation on the written examination will be reviewed on a case-by-case basis. If the appropriateness of the requested accommodation is in doubt, the certifying agency will discuss options with the candidate and will consult with professionals knowledgeable about disability and functions of the profession. The recency of disability testing is not an issue in determining the need for accommodation. A permanent learning disability is a permanent disability.

VI. DEFINITION

The word "written" was purposefully included to ensure that certified individuals could read. The written portion of the EMS certification examination is designed, in part to measure an applicant's ability to read and understand English. Being able to read is a skill that is justified as integral to the performance of the job.

VII. RECORD KEEPING

Diagnostic information related to an individual's disability is highly confidential and will not be disclosed to third parties. The accommodation file will be maintained separately from the application and test result files.